PTO/SB/21 (09-04) Approved for use through 07/31/2006, 0MB 0551-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons Application Number 10/003,459 RECEIVED TRANSMITTAL Filing Date October 31, 2001 CENTRAL FAX CENTER First Named Inventor FORM San Yuan Liew 2651 12004 Examiner Name Alan Faber (to be used for all correspondence after initial filing) Attorney Docket Number STL10252 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC IXI Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer helow): Extension of Time Request Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Seagate Technology LLC Signature Printed name David K. Lucente Reg. No. Date 36,202 3/04 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22313-1450 on the date shown below: Signature Date 12/03/2004 Zeina Smith Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.4. This collection is estimated to 2 hours to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will expending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandría, VA 22313-1450. DO NOT SEND PEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandría, VA 22313-1450.

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PTO/SB/17 (11-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMENCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number						
Effective on 10/01/2004. Patent less are subject to annual revision.	Complete if Known					
	Application Number	10/003,459				
FEE TRANSMITTAL	Filing Date	October 31, 2001				
For FY 2005	First Named Inventor	San Yuan Li	ew			
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Alan Faber				
Applicant daims small entity status. See 37 CFR 1.27	Art Unit	2651				
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket No.	STL10252				
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit Card Money Order	2. EXTRA CLAIM	FEES	E	Small Entity		
	Fee Description Each claim over 20		Fee (\$) 18	Fee (5)		
X Deposit Account None	Each independent cl		88	44		
Deposit Account 19-1038	Multiple dependent For Reissues, each of		300 ad	150		
Mumber	more than in the o		18	9		
Deposit Account	For Reissues, each i	ndependent clai	im			
Name	more than in the o		88	44		
The Director is hereby authorized to: (check all that apply)	Total Claims	Extra Claims	<u>Fee (\$) </u>	ee Paid (\$)		
X Charge fee(s) indicated below	- 20 or HF HP = highest number of	total claims paid for		20		
Charge fee(s) indicated below, except for the filing fee	Indep. Claims	Extra Claims	Fee (\$)	ee Paid (\$)		
Charge any additional fee(s) or underpayments of fee(s)	-3 or HP = x =					
under 37 CFR 1.16 and 1.17	HP = highest number of independent claims paid for, if greater than 3 Multiple Dependent Claims Fee (\$) Fee Paid (\$)					
Credit any overpayments	Multiple Depandent C	iaims.	Lea (a)	ou Falu (4)		
to the above-identified deposit account.	Subtotal (2) \$					
Other (please identify):	3. OTHER FEES Small Entity					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card	Fee Description 1-month extension of t	Fee (\$ ime 110	Fee (\$) 55	110.00		
Information and authorization on PTO-2038. FEE CALCULATION	2-month extension of t	ime 430	215			
	3-month extension of t	ime 980	490			
1. BASIC FILING FEE Small Entity	4-month extension of t	ime 1,530	765			
Fee Description Fee (\$) Fee Paid(\$)	5-month extension of t	ime 2,080	1,040			
Utility Filing Fee 790 395	Information disclosure	stmt. fcc 180	180			
Design Filing Fee 350 175	37 CFR 1.17(q) proces	sing fee 50	50			
Design range ce 330 173	Non-English specificat		130			
Plant Filing Fee 550 275	Notice of Appeal	340	170	340.00		
Reissue Filing Fee 790 395	Filing a brief in suppor		170 150			
Provisional Filing Fee 160 80	Request for oral hearin Other:	g 300	130			
	Oniet		1 (4) C			
Subtotal (1) \$	<u></u>	Subtota	1 (3) \$	440.00		
SUBMITTED BY		1.				
Signature 1915. 16	Registration No. (Attorney/Agent) 36	,202 Tele	phone 720	-684-2295		
Name (Print/Type) David K. Lucente		Date	Decemb	er 3, 2004		

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this buryan should be sent to the Chief information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 10/01/2004. Patent foes are subject to annual revision.	Complete if Known					
•	Application Number	10/003,459				
FEE TRANSMITTAL	Filing Date	October 31, 2001				
For FY 2005	First Named Inventor	San Yuan Liew				
	Examiner Name	Alan Faber				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit					
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket No. STL10252					
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
	2. EXTRA CLAIM	FEES	Fee (\$)	Small Entity Fee (\$)		
Check Credit Card Money Order	Fee Description Each claim over 20		18	9		
X Deposit Account None	Each independent cl	aim over 3	88	44		
	Multiple dependent	claims	300	150		
Account 19-1038	For Reissues, each claim over 20 and					
Number Deposit	more than in the original patent 18 9 For Reissues, each independent claim					
Appount Name	more than in the original patent 88 44					
The Director is hereby authorized to: (check all that apply)	Total Claims		ee (\$) Fe	e Paid (\$)		
X Charge fee(s) indicated below	- 20 or HF HP = highest number of	total claims paid for, if s	reater than 2	_		
Charge fee(s) indicated below, except for the filing fee	Indeo, Claims	Extra Claims	ee (\$) F	ee Paid (\$)		
Charge any additional fee(s) or underpayments of fee(s)	- 3 or HP = X HP = highest number of independent claims paid for, if greater than 3					
under 37 CFR 1.16 and 1.17	Multiple Dependent Claims Fee (\$) Fee Paid (\$)					
Credit any overpayments						
to the above—identified deposit account.	Subtotal (2) \$					
Other (please identify):	3. OTHER FEES		mall Entity	Fee Pald(\$)		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card	Fee Description 1-month extension of t	Fec (\$) ime 110	Fee (S) 55	110.00		
Information and authorization on PTO-2038.	2-month extension of t		215			
FEE CALCULATION	3-month extension of t		490 .			
1. BASIC FILING FEE	4-month extension of t	ime 1.530	765			
Fee Description Fee (5) Fee (5) Fee Paid(5)	5-month extension of t		1,040			
	Information disclosure	stmt. fee 180	180			
Utility Filing Fee 790 395	37 CFR 1.17(q) proces	sing fcc 50	50			
Design Filing Fee 350 175	Non-English specifica	don 130	130			
Plant Filing Fee 550 275	Notice of Appeal	340	170	340.00		
	Filing a brief in suppo	nt of appeal 340	170			
Reissue Filing Fee 790 395	Request for oral hearing	ng 300	150			
Provisional Filing Fee 160 80	Other:	•				
Subtotal (1) S		Subtotal (3) \$	440.00		
SUBMITTED BY	Registration No. 36	,202 Telepho	one 720	-684-2295		
Signature	(Attorney/Agent)	Date	Decembe	r 3, 2004		

This collection of information is required by 97 CFR 1.13s. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete use the confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete this form a confidency of the USPTO. Time will very depending upon the Inclivitual case. Any comments on the amount of time you require to complete this form addors suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent on the amount of time you require to complete this form addors suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent on Transmark Officer. U.S. Department of Commerce, P.O. 8ox 1450, Alexandria, VA 22313-1450. ON ONT SEND FEES OR COMPLETED FORMS YO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 8ox 1450, Alexandria, VA 22313-1450.